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SERIAL NUMBER	FILING DATE	FIRST NAMED	APPLICANT	TAT	TORNEY DOCKETT NO.
09/599,274	6/22/00	Garrill	1 1	1	PG4114
			Γ-	EXAMINER Foster	
				ART UNIT	PAPER NUMBER
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			DATE	E MAILED:	
	Œ	xaminer interview su	immary record		
All participants (applicant,	applicant's representativ	/e, PTO personnel):			
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(1) <u>CALLED F</u>	her P. R. G. Foster	(5)			
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Date of interview	126/01		•		
Type: ☐ Telephonic	Personal (copy is giver	to □ applicant 🖾 applicant's		44-	111
Exhibit shown or demonst	ration conducted: 12 Ye	s No. If yes, brief description	n:An	1 CINI	Inhaler
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Agreement was read	ned with respect to some	or all of the claims in question.	☐ was not reached.	•	
Claims discussed:	1.[[
Identification of prior art d	scussed: Non	<u></u>			
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Description of the general	nature of what was agree	eed to if an agreement was reache	ad or any other commen	. Applica	of will
lile a ter	mature of what was agree	de lo il all'agreement was reache		to man	Statutor
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(A fuller description, if nec attached. Also, where no	essary, and a copy of the	e amendments, if available, which s which would render the claims a	the examiner agreed wo	ould render the claim ummary thereof mus	s allowable must be it be attached.)
		a separate record of the substance		Jim Foster	•
WAIVED AND MUST INC	LUDE THE SUBSTANC	indicate to the contrary, A FORM E OF THE INTERVIEW (e.g., iter en one month from this interview	ns 1-7 on the reverse side	e of this form). If a r	esponse to the last Office
requirements that response require	t may be present in the laments of the last Office a	above (Including any attachments ast Office action, and since the cl action. Applicant is not relieved fr	aims are now allowable, i	this completed form	is considered to fulfill the
box 1 above is a	SO CHECKEO.		<u>a</u>		ba
DTOL 412 (DEV. 2.02)			Examiner's Signature	1	